MULTIPLE DEPENDENT CLAIM SERIAL NO. FILING DATE FEE CALCULATION SHEET 563,710 (FOR USE WITH FORM PTO-875) **CLAIMS** AFTER AFTER AS FILED AS FILED AFTER I AMENDMENT 1 AMERBHENT AFTER ("AMERDMENT IND. DEP. 2 MAMENDMENT IND. DEP. IND. DEP. IND. DEP. IND. DEP. IND. DEP. 30 TOTAL IND T A T TOTALEX P **∳**□ TOTAL DEP ⇍ TOTAL TOTAL CLABOS U.S. DEPARTMENT OF COMMERCE

SEST AVAILABLE COPY